

Nurses' perception of nursing diagnosis

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Abstract

Formulating a nursing diagnosis on the basis of a patient's situation and health is a task that places great demands on a nurse's skills in many areas. The nurses in the study were in contact with nursing diagnoses in their daily work, mainly in standard care plans. All were in favor of using care plans and nursing diagnoses. Awareness of the signs and related factors that exist in the electronic health record (EHR) was low.

Introduction

A care plan is the most important work tool for nurses in indirect patient care in process oriented healthcare work. Formulating a nursing diagnosis on the basis of a patient's situation and health is a task that places great demands on the nurse's skills in many areas. The nurses are motivated in their work with nursing diagnoses as they clarify the individual needs of the patient. A nursing diagnosis helps nurses to see the patient in a holistic perspective, which facilitates the decision of specific nursing interventions. The use of nursing diagnoses can lead to greater quality and patient safety and may increase nurses' awareness of nursing and strengthen their professional role. The underlying processes that form the basis for work leading to the formulation of a nursing diagnosis is therefore of great interest.

The aim of the study was to describe nurses' perceptions and experiences of using nursing diagnoses in clinical work with a focus on the use of signs and related factors.

The method used was a descriptive interview study with a qualitative design. Data was collected through semi-structured interviews with ten nurses of both sexes and of varying experience as a nurse (r=1-23 years) working in two acute medical units. The interviews were conducted from February to March 2009. The interview questions address attitudes toward and experiences using nursing diagnosis. The collected material has undergone a manifest content analysis with an inductive approach.

The results show that all the informants were in contact with nursing diagnoses in their daily work, mainly in standard care plans, where there are pre-formulated nursing diagnoses, but also in individual care plans, where they have to formulate nursing diagnoses themselves. All nurses read and proceeded in their work using the nursing diagnoses existing in the patient's medical records but not all formulated nursing diagnoses themselves. All were in favor of using care plans and nursing diagnoses. The structure of the care plans and nursing diagnoses was perceived positively the structure gave clarity and a common base to work from. Awareness of the signs and related factors that exist in the electronic patient record was low. Nursing diagnoses were formulated mostly from the nurse's individual perception not using signs and related factors. Discussions about nursing documentation or nursing diagnoses were not common.

Conclusion

There is a lack of awareness in the studied units about how to make optimum use of nursing diagnoses in care plans. Clinical signs and related factors are currently not applied to any great extent in care planning in the studied units and therefore the quality and comparability of nursing diagnoses varies.

References

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